



Family Canoe Day Registration Form

Family Member Names and Ages:

(If you are bringing more than 6 family members please fill out an additional online registration form.)

	Name	Age	Canoe experience?
1			___ Yes ___ No
2			___ Yes ___ No
3			___ Yes ___ No
4			___ Yes ___ No
5			___ Yes ___ No
6			___ Yes ___ No

Please list any conditions that may prevent any member of your family from participating fully:

Please list any allergies or current medical conditions:

Contact information:

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

All adults in the family should read and initial the following items:

- ___ ___ ___ We will bring lunch with us, since there won't be time to go out.
- ___ ___ ___ We will bring all necessary medications, including Epi-pens and inhalers.
- ___ ___ ___ LOOP/NORDC has permission to use our image for promotional purposes
- ___ ___ ___ We understand canoeing can be risky, and our family will respect the requests and directions of all staff members.

Submit completed registration forms by the first Thursday of the month to:

Emily Snyder, NORDC, 800 Race Street, NOLA 70130 or email scanned copy to ersnyder@nola.gov

Questions? Call Emily at 954-600-7022.